

**SIGN PERMIT APPLICATION
GEORGETOWN/SCOTT COUNTY
BUILDING INSPECTION DEPARTMENT
800 CINCINNATI ROAD, SUITE 4, GEORGETOWN, KY 40324
PHONE: (502)863-9802 – FAX: (502)863-4169**

Applicant _____ Phone _____

Address _____

City _____ State _____ Zip _____

Owner _____ Phone _____

Address _____

City _____ State _____ Zip _____

Name of business/use proposed sign(s) is for _____

Location/Address of proposed sign(s) _____ Location is zoned _____

Type of proposed sign(s) *wall / freestanding / projecting / off premises*

Size of proposed sign(s) _____ Construction Cost \$ _____

Area of proposed sign(s) _____ Height of proposed sign(s) _____

Length of building wall fronting a street _____

Will any portion of the proposed sign(s) encroach into the public right-of-way? Yes or No

Type of existing sign(s) _____ Size of existing sign(s) _____

Area of existing sign(s) _____ Height of existing sign(s) _____

APPLICANT _____ **DATE** _____

***Attach an elevation drawing showing proposed sign with dimensions including height
and a site plan showing the location of proposed sign with distances from property lines,
street, building(s), other signs on the same lot, etc.***

Department Use

Amount _____ Receipt _____ Date _____ Received By _____

Notes _____

PERMIT REVIEWER _____